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Medicaid, CHIP, and Managed Care Organizations

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Purpose and Outline

Purpose to provide information to disaster planners about Medicaid and CHIP members, potential needs, and the importance of partnerships with Medicaid and CHIP managed care organizations



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Medicaid

What is Medicaid?

- Jointly funded state-federal program that provides medical coverage to eligible needy persons
- Federal laws and regulations require coverage of certain populations and services
- States have flexibility to cover additional populations and services



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Eligible Populations Served



The four main categories of Medicaid-eligible individuals who may receive full benefits are:

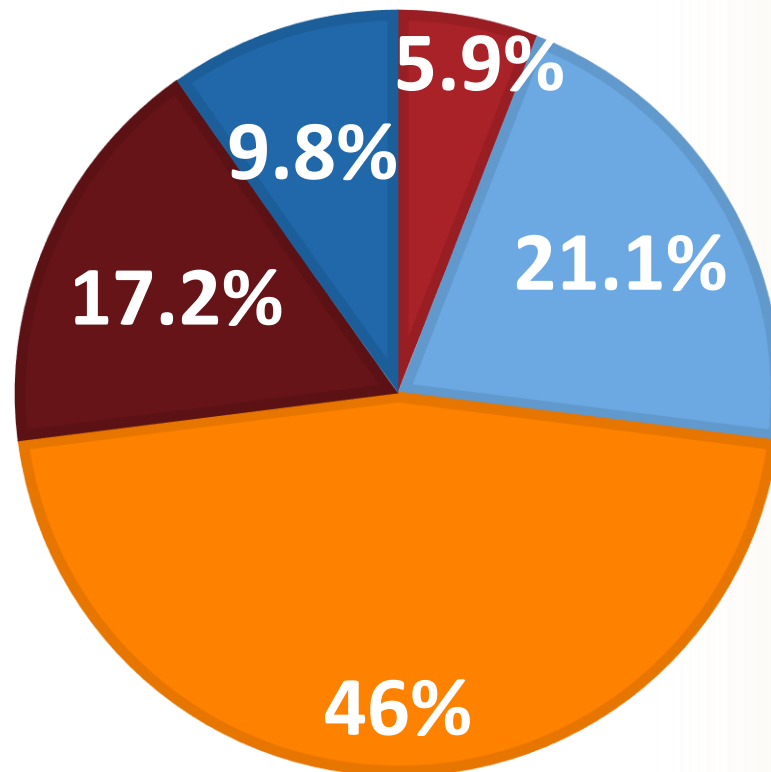
- Children, pregnant women, and parent and caretaker relatives
- SSI recipients
- People age 65 and older and those with disabilities
- Current and former foster care youth



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Texas Medicaid Recipients by Age, as of February 2018

- Under age 1
- Age 1 to 5
- Age 6 to 20
- Age 21 to 64
- Age 65 and older



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Service Examples

- Inpatient and outpatient hospital services
- Physician services
- Laboratory & x-ray services
- Home health services
- Prescription drugs
- Case management
- Physical therapy
- Occupational therapy



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Managed Care vs Fee-for-Service

Managed Care Organizations (MCOs)

- Authorized by the federal government through an 1115 waiver
- Providers contract and credential with health plans to provide services
- Providers are paid rates negotiated between the provider and the MCO



Managed Care vs Fee-for-Service

Fee-for-Service (FFS)

- State-operated plan
- Providers contract directly with the state
- Providers are paid FFS rates



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Managed Care Programs

- **STAR:** Children, pregnant women, parents/caretaker relatives, and some former foster care youth
- **STAR+PLUS:** Individuals over age 21 with severe disabilities
- **STAR Health:** Children and youth in state conservatorship
- **STAR Kids:** Individuals age 20 and younger with severe disabilities



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CHIP 101

Children's Health Insurance Program (CHIP)

- Medical coverage for uninsured children up to age 19
- Joint state-federal program
- Federal funding
- Limited to block grant amounts allocated to each state



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CHIP 101 (cont.)

Children's Health Insurance Program (CHIP)

- Not entitlement program, so states can:
 - Determine age and income eligibility
 - Cap enrollment
- Limit service benefits (as approved by HHS)



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CHIP Eligibility

CHIP covers children in families who:

- Have too much income or too many assets to qualify for Medicaid
- Cannot afford to buy private insurance
- Generally are below 200% of the FPL
- U.S. citizens or legal permanent residents
- Not eligible for Medicaid



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CHIP Cost Sharing

Enrollment fees and co-pays are based on family income:

- Enrollment fees: \$50 or less per family, per year.
- Co-pays for doctor visits and prescriptions:
 - Range from \$0 to \$5 for lower-income families
 - \$10 to \$35 for higher-income families.



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Disaster Response

Potential Member Needs

- Replace or repair durable medical equipment (DME) such as ventilators and power wheelchairs
- Replace prescriptions and get early refills
- Get services in a different city out of their health plan's network if displaced
- Bring attendant care providers to shelters or other locations where displaced



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MCO Role

- Identify where members are and if members are safe, including:
 - Those residing in nursing facilities, State Supported Living Centers, State Mental Hospitals, other institutional settings, and
 - Those who require home health services
- Identify immediate and long-term needs of members
- Ensure out-of-network providers are able to bill and be paid for delivering services



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MCO Requirements

- New requirement to have a continuity of member care plan
- This plan will require MCOs to coordinate with local emergency management resources in preparation of, and in the event of, a disaster



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HHSC Medicaid Program

Role: Waiving Provisions

- Identify and request waivers of provisions at the state and federal level that may be needed in order to ensure continuity of care for the approximate 1.9 million Medicaid and CHIP enrollees related to:
 - Out of state licenses
 - Provider enrollment
 - Provider flexibilities
 - Member flexibilities
 - Out-of-network providers
 - CHIP co-payments and enrollment fees waived



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HHSC Medicaid Program

Role: MCO Coordination

- Monitor and support MCOs in coordinating care for beneficiaries impacted by the disaster including outreach to members to support members in need of critical services and supports such as:
 - Dialysis,
 - Durable medical equipment and
 - Lifesaving medications



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HHSC Medicaid Program

Role: MCO Coordination

- Daily MCS reports and calls detailing care coordination efforts, aimed at assessing urgent needs of Medicaid and CHIP members and ensuring knowledge of where members residing in nursing facilities are if they have been evacuated.



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Where to Get Information

- HHSC's Medicaid/CHIP Disaster webpage:
<https://hhs.texas.gov/services/health/medicaid-chip/provider-information/>
- MCOs



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Questions?

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